Case 3:17-cv-00072-NKM-JCH Document 1560 Filed 03/14/22 Page 1 of 1 Pageid#: 30322			
A0435 ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS			FOR COURT USE ONLY
(Rev. 04/18; WDVA Rev. 11/19)			DUE DATE:
TRANSCRIPT ORDER FORM Please Read Instructions on Page 2.			
1. REQUESTOR'S	NAME TELEPHONE NUMBER		
INFORMATION:	JAMES LOEFFLER		
DATE OF REQUEST	EMAIL ADDRESS (Transcript will be emailed to this address.)		
3/13/22	JLOEFFLEE @ GMAIL. COM		
MAILING ADDRESS	CITY, STATE, ZIP CODE		
PO Box 400180	Whiv. of Virginia Charlette		ill, VA 22904
2. TRANSCRIPT REQUESTED:	NAME OF COURT REPORTER		
OR CHECK HERE IF HEARING WAS RECORDED BY FTR			
CASE NUMBER	CASE NAME	JUDGE'S NAME	
1 3:17-cv-00072-NEM-	SINBS ET AL V. KESSLER ET AL	WIAMAN	more
DATE(S) OF	TYPE OF PROCEEDING(S)	LOCATION OF PI	ROCEEDING
PROCEEDING(S)	CIVIL TRIAL	01 /14 1	
Oct 25 - Ni 23,202	10170	Charletton	(4, VA
REQUEST IS FOR: (Select one) FULL PROCEEDING OR SPECIFIC PORTION(S) (Must specify below)			
SPECIFIC PORTION(S) REQUESTED (If applicable):			
3. SERVICE TURNAROUND CATEGORY REQUESTED:			
(See Page 2 for descriptions of each service turnaround category.)			
Ordinary (30-Day)	Daily		
14-Day	Hourly		
IT-Day	l nouny		
Expedited (7-Day)	RealTime		
3-Day			
4. <u>CERTIFICATION</u> : By signing below, I certify that I will pay all charges (deposit plus additional).			
DATE	SIGNATURE		

If you have any questions, please contact the court reporter coordinator at (540) 857-5152 or by email to CRC@vawd.uscourts.gov.

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<u>NOTE</u>: Form must be flattened prior to electronically filing in CM/ECF so that all fillable fields can no longer be modified.